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FISCAL IMPACT STATEMENT

LS 7308

BILL NUMBER: HB 1202

NOTE PREPARED: Feb 17, 2004

BILL AMENDED: Jan 29, 2004

SUBJECT: Surveillance of Public Health Threats.

FIRST AUTHOR: Rep. Lawson L

FIRST SPONSOR: Sen. Dillon

BILL STATUS: CR Adopted - 2nd House

FUNDS AFFECTED: X GENERAL
DEDICATED
X FEDERAL

IMPACT: State & Local

Summary of Legislation: (Amended) This bill requires the State Department of Health to collect data related to symptoms and health syndromes from outbreaks of disease or other health conditions that may be a danger to public health. The bill requires a health provider that collects certain data to report this data to the State Department of Health. The bill also requires a school corporation or an accredited school to report to the local health department the percentage of student absences above a threshold determined by the department of education.

The bill also adds Carisoprodol, a depressant, to the list of schedule IV controlled substances.

Effective Date: (Amended) Upon passage; July 1, 2004.

Explanation of State Expenditures: (Revised) *Surveillance of Public Health Threats:* (1) The bill requires the Indiana State Department of Health (ISDH) to establish reporting, monitoring, and preventive procedures for symptoms and health syndromes from outbreaks or suspected outbreaks of diseases or other health conditions that may be a danger to public health. The Epidemiology Resource Center (ERC), a part of the ISDH, operates the Disease Surveillance and Communicable Disease programs. Staff for the programs consist of 20 individuals, 9 of whom are located in the Bioterrorism Preparedness Districts established by the ISDH as part of the Public Health Preparedness and Bioterrorism Response Activities. The 9 positions are fully funded through the federal Bioterrorism Response program. The ISDH reports that it should be able to implement the requirements of this bill within current federal Bioterrorism Response funding (\$2.1 M).

(2) The bill requires health care providers or other organizations or entities that collect data and information concerning counterterrorism, related outbreaks of infectious disease, or public health threats and emergencies, to report information collected to the ISDH. The ISDH would need to create procedures for health care

providers or other organizations or entities to report the information. There may be minimal costs for these entities to implement the procedures. The actual increase in expenditures, however, is dependent on the administrative action taken by the ISDH.

(3) This bill also requires accredited nonpublic schools and school corporations to develop and implement a system of notifying local health departments of the percentage of student absences above a threshold determined by the ISDH. Currently, Indiana schools collect information concerning the number of students absent each day. Each school employs a staff member whose responsibilities include monitoring attendance. It is expected that this individual would be responsible for forwarding attendance information to the school corporation.

Accredited nonpublic schools and school corporations may realize expenditures when implementing the process to collect and forward information from schools in their corporations to the local health departments. Local health departments may also experience an increase when forwarding information to the ISDH. These additional costs, however, are dependent on the administrative action taken by the ISDH.

Background: For the 2002-2003 school year, Indiana's average daily membership (ADM) consisted of 968,330 students, and public school enrollment totaled 1,001,961. Approximately 2,000 public schools were in operation within Indiana's 293 school corporations during that time.

Carisoprodol: This bill expands the list of schedule IV controlled substances to include carisoprodol, a depressant used for the relief of discomfort associated with acute musculoskeletal conditions. The fiscal impact of this bill would be dependent upon individual circumstances involving abuse of controlled substances.

Penalty Provisions: Schedule IV depressants are considered as controlled substances according to IC 35-48-2-9. There are several penalties involved with the illegal selling, possession, and use of these substances. More severe penalties exist for extenuating circumstances surrounding the violating activity with a controlled substance, including sale to a minor, sale in, on, or within 1000 feet of school property, a family housing complex, a youth program center, and sale on a school bus. IC 35-48-4-3 lists the following penalties for violations.

Offense	Penalty
Manufacture/delivery or finances manufacture/delivery of a Class IV controlled substance (adulterated or pure)	<ul style="list-style-type: none">- Class C Felony- Class B Felony if delivered to a minor at least three years junior of person delivering controlled substance, delivered on a school bus, in, on, or within 1000 feet of school property, a public park, a youth program center, or a family housing complex.

A Class B felony is punishable by a prison term ranging from 6 to 20 years depending upon mitigating and aggravating circumstances. A Class C felony is punishable by a prison term ranging from 2 to 8 years depending upon mitigating and aggravating circumstances. Assuming offenders can be housed in existing facilities with no additional staff, the average cost for medical care, food, and clothing is approximately \$1,825 annually, or \$5 daily, per prisoner. However, any additional expenditures are likely to be small. The average length of stay in Department of Correction (DOC) facilities for all Class B felony offenders is approximately 3.7 years. The average length of stay for all Class C felony offenders is approximately 2 years.

Explanation of State Revenues: *Penalty Provision:* If additional court cases occur and fines are collected, revenue to both the Common School Fund (from criminal fines) and the state General Fund (from court fees) would increase. The maximum fine for a Class B or C felony is \$10,000. However, any additional revenues would likely be small.

In addition, persons convicted of a drug-related offense may also be liable for additional fees.

Explanation of Local Expenditures: *Penalty Provision:* If more defendants are detained in county jails prior to their court hearings, local expenditures for jail operations may increase. However, any additional expenditures would likely be small.

In addition, persons convicted of a drug-related offense may also be liable for additional fees.

Surveillance of Public Health Threats: See Explanation of State Expenditures.

Explanation of Local Revenues: *Penalty Provision:* If additional court actions occur and a guilty verdict is entered, local governments would receive revenue from court fees. However, the amounts would likely be small.

In addition, if a person is convicted of a drug-related offense, a sentencing court may assess additional fees.

State Agencies Affected: Indiana State Department of Health; Department of Correction.

Local Agencies Affected: School Corporations; Local health care providers, organizations, and entities; Trial courts, local law enforcement agencies.

Information Sources: Kathryn Brigham, Department of Health; www.rxlist.com/cgi/generic/carisop_ad.htm.

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